

SESSION SCHEDULE CHECKLIST

	wing checklist has been developed to assist you when preparing and submitting a Session Form.
1.	Please include your State License Number (EX: G-0005670), if applicable.
2.	A correct fax number or e-mail address must be provided in order for the Office to fax or e-mail a license.
3.	Organization Official must complete the amount of rent per session and provide a lease, if applicable.
4.	When submitting a request to <i>add or delete</i> a session(s), <i>organization official and commercial lessor/non-commercial lessor</i> must sign the form approving the session(s).
5.	List all dates and times of events. Enter the starting time of a session as the time the organization will begin selling paper/pulltabs. Circle AM or PM, Length, and Add or Delete.
6.	 Additional Session Schedule A. If organization has events at more than one location, complete a form for each location and include lease agreement, if applicable. B. List all dates, times and length of sessions for each additional location.
7.	Lease AgreementA. If organization is paying rent for any location, submit a signed lease agreement.B. Lease agreements must include all dates and times organization is to conduct gaming activities.
8.	When changing schedule of dates and times, give specific dates and times. Use the Calendar Schedule for changing multiple sessions. A. Circle add or delete B. Circle a.m. or p.m. C. Enter the start time. D. Enter the length of session: for example, 2, 4, 6 or 8 hours. Session cannot exceed 8 hours.
9.	The second and subsequent revisions to your license must be accompanied by a \$25 check , made payable to "Office of Charitable Gaming" and written on the gaming account.

If you have questions concerning any application information, contact the Office at 1-800-562-9235 or locally at 225-925-1835. You may also visit our website at www.ocg.louisiana.gov.



Initials

Office of Charitable Gaming
PO BOX 98502, Baton Rouge, LA 70884-9502
(225) 925-1835 or (800) 562-9235 FAX (225) 219-1910 www.ocg.louisiana.gov

Session Schedule

	RIGINAL APPLI	CATION				License Ve	ar Ending 6/30/20	
_	ENEWAL	CATION					se Number:	
_		CETO LICENI						
□ R	EQUEST CHAN	GETO LICENS	SE			G		
		*** Pleas	e use one form	per location w	here games a	re played **	*	
Name	of Organization			•	J		Organization Fax N (where you want the li	
Name	of Building Where C	Sames are Conducte	d		Building Phone	e #	Building Fax Numb	per
					()		()	
Physic	cal Address of Buildi	ng (Include City & Z	Zip Code)		Parish of Build	ing	E-mail Address	
	unt of rent per ses			Check here	e if building is own	ned by organizati	on or provided free	of charge.
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Lease Agreement:

Page 5

Device Agreement:

Office	of Charit	State License # G-				
Organization Name:		Signature of Organization Official Approval: (Required)			Organization Phone #:	
Building Where Games are Held:		Lessor (Hall) Approval (Required) Date signed: Hall Contact Pho			Hall Contact Phone #:	
Rent Amount \$		Fax Number / E-mail address :				
Building Address:	1. (k if this schedule will delete all sessions pr Change requests must be submitted no later than 5 ubmit the entire year's schedule to avoid addition	(five)) business days in adva		

3. Enter time and length of session and circle AM or PM and Add or Delete.

July	2021

	July 2021										
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday					
There may be oth	d for your informatio ers not listed. Session — Independence Dag	ns may be scheduled	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	3 Add Delete Time: AM PM Length:						
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If any requested session conflicts with another organization's scheduled session, yours will not be approved. The office has the right to deny modification if organization is in arrears.

	Office o	f Charitable Gan	ning	Sta	te License # G-	
Organization Nar	ne:	Signature (Required)	of Organization Offic	ial Approval:	Date signed:	Organization Phone #
Building Where Games are Held: Lessor (Hall) Approval (Required) Date signed: Hall Co					Hall Contact Phone #:	
Rent Amount \$		Fax Numb	per / E-mail address :			•
Building Address	:	() Check if this	schedule will delet	te all sessions	s previously submit	tted for this month.
					(five) business days in	
		2. Submit the e	ntire year's schedule to	avoid addition	al charges and/or delays	S.
		3. Enter time an	nd length of session an	d circle AM or	PM and Add or Delete.	
			August 2021			
Sunday	Monday	Tuesday	Wednesday	Thurso	lay Friday	Saturday
· -			tion's scheduled sess	ion, yours will	not be approved.	
The office has th	e right to deny mo	dification if organiza	ntion is in arrears.			
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Add Delete	Add Delete	Add Delete	Add Delete	Add Dele		Add Delete
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	Office of Charitable Gaming				
Organization Name:	Signature of Organization Official Approve (Required)	1:	Date Signed	Organization Phone #:	
Building Where Games are Held:	Lessor (Hall) Approval (Required)	Lessor (Hall) Approval (Required) Date Signed: Hall Cont			
Rent Amount \$	Fax Number / E-mail address :	<u>'</u>			
Building Address:	 Check if this schedule will delete all sessions Change requests must be submitted no later th Submit the entire year's schedule to avoid add Enter time and length of session and circle AN 	n 5 (five) tional charge	business days in adveges and/or delays.		

	September 2021									
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	Office of	f Charitable Gan	ning	Sta	te License #G-	
Organization Nan	ne:	Signature (Required)			Date signed:	Organization Phone #:
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Add Delete	Add Delete	Add D	elete	yours will not be a		Office ha	s the right to den	y modification if
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Office	of Charita	State License #G-			
Organization Name:		Signature of Organization Official Approval: (Required)	Date Signed	Organization Phone #:	
Building Where Games are Held:		Lessor (Hall) Approval (Required) Date Signed: Hall Cont		Hall Contact Phone #:	
Rent Amount \$		Fax Number / E-mail address :			
Building Address:	3. C 4. S	ck if this schedule will delete all sessions previously submitted for this month. Change requests must be submitted no later than 5 (five) business days in advance. Submit the entire year's schedule to avoid additional charges and/or delays. Enter time and length of session and circle AM or PM and Add or Delete.			

	December 2021								
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If any requested session conflicts with another organization's scheduled session, yours will not be approved. The Office has the right to deny modification if organization is in arrears.

	Office	of Charitable Gamin	g	te License #G-	License #G-		
Organization Nam	e:	Signature ((Required)	Signature of Organization Official Approval: (Required)			Organization Phone #:	
Building Where G	ames are Held:	Lessor (Ha	ll) Approval (Required	1)	Date signed:	Hall Contact Phone #:	
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			January 2022				
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Add Delete Time: AM PM Length: 23 Add Delete Time: AM PM	17 Add Delete Time: AM PM Length: 24 Add Delete Time: AM PM	18 Add Delete Time: AM PM Length: 25 Add Delete Time: AM PM	19 Add Delete Time: AM PM Length: 26 Add Delete Time: AM PM	20 Add Delete Time: AM PM Length: 27 Add Delete Time: AM PM	Time: AM PM Length:	22 Add Delete Time: AM PM Length: 29 Add Delete Time: AM PM	
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					State License	. #C		
	Office of	of Charitable Gan	0					
Organization Name:		(Require		Approval:	Date sign		Organization Phone #:	
Building Where Game	es are Held:	Lessor ((Hall) Approval (Required)		Date sign	;ned:	Hall Contact Phone #:	
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4. Cl 5. Su		4. Change requ5. Submit the e	. Submit the entire year's schedule to avoid additional charges and/or delays.					
			February 2022					
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Holidays are listed for your information only. There may be others not listed. Add Sessions may be scheduled on these days. Holidays: February 14th -Valentine's AM		1 Add Delete	Add Delete Time: AM PM Length:	3 Add De Time:	elete A	Add Delete Time: AM PM Length:	5 Add Delete Time: AM PM Length:	
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27 Add Delete Time: AM PM Length:	28 Add Delete Time: AM PM Length:	If any request	ted session conflicts with ne Office has the right to	h another o	rganization'	's scheduled ses	ssion, yours will not be	

Office of	State License #G-					
Organization Name:		Signature of Organization Official Approval: (Required)		Date signed:	Organization Phone #:	
Building Where Games are Held:		Lessor (Hall) Approval (Required)		Date signed:	Hall Contact Phone #:	
Rent Amount \$		Fax Number / E-mail address :				
Building Address:	 Check if this schedule will delete all sessions previously submitted for this month. Change requests must be submitted no later than 5 (five) business days in advance. Submit the entire year's schedule to avoid additional charges and/or delays. Enter time and length of session and circle AM or PM and Add or Delete. 					

March 2022							
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	

Holidays are listed for your information only. There may be others not listed. Sessions may be scheduled on these days.

Holiday: March 1 th – Mardi Gras Day

March 2 th Ash Wednesday

March 17 th – St. Patrick's Day

		1 Add Delete	2 Add Delete	3 Add Delete	4 Add Delete	5 Add Delete
		Time: AM PM Length:	Time: AM PM Length:	Time: AM PM Length:	Time: AM PM Length:	Time: AM PM Length:
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Add Delete Time: AM PM Length:	28 Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	another organizat	•

Office of Charitable Gaming				State License #G-		
Organization Name:		Signature of Organization Official Approval: (Required)		Date signed:	Organization Phone #:	
Building Where Games are Held:		Lessor (Hall) Approval (Required)		Date signed:	Hall Contact Phone #:	
Rent Amount \$		Fax Number / E-mail address :				
Building Address:	 () Check if this schedule will delete all sessions previously submitted for this month. 4. Change requests must be submitted no later than 5 (five) business days in advance. 5. Submit the entire year's schedule to avoid additional charges and/or delays. 6. Enter time and length of session and circle AM or PM and Add or Delete. 					
		April 2022				

			April 2022			
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
these days. Holiday: April 15t		only. There may be ot	thers not listed. Sessions	may be scheduled on	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:
3 Add Delete Time: AM PM Length:	4 Add Delete Time: AM PM Length:	5 Add Delete Time: AM PM Length:	6 Add Delete Time: AM PM Length:	7 Add Delete Time: AM PM Length:	8 Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:
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If any requested session conflicts with another organization's scheduled session, yours will not be approved. The Office has the right to deny modification if organization is in arrears.

	Office o	f Charitable Gam	ning	S	tate License #G-	
Organization Name: Sign (R			of Organization Offi	cial Approval:	Date signed:	Organization Phone #:
Building Where G	ames are Held:	Lessor (H	all) Approval (Requi	red)	Date signed:	Hall Contact Phone #:
Rent Amount \$		Fax Num	ber / E-mail address :		<u> </u>	
Building Address:		() Check if this	schedule will dele	te all session	ns previously subr	nitted for this month.
		2. Submit the e	ntire year's schedule t	o avoid additio	5 (five) business days nal charges and/or del r PM and Add or Dele	lays.
			May 2022			
Sunday	Monday	Tuesday	Wednesday	Thurs	•	· · ·
Holidays are listed Holidays: May 8 th May 30	d for your informa i – Mother's Day th – Memorial Day	tion only. There may	be others not listed.	Sessions may b	e scheduled on these	days.
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29 Add Delete Time: AM PM Length:	30 Add Delete Time: AM PM Length:	31 Add Delete Time: AM PM Length:	yours will not be a	pproved.	with another organizated	tion's scheduled session,

	Office of	f Charitable Gami	ing	Stat	e License #G-	
Organization Nat			of Organization Offici	al Approval:	Date signed:	Organization Phone #:
Building Where	Games are Held:	Lessor (Ha	ll) Approval (Require	ed)	Date signed:	Hall Contact Phone #
Rent Amount \$		Fax Number	er / E-mail address :			
Building Address	s:	 Change requ Submit the 	uests must be submitte entire year's schedule	ed no later than to avoid additio	reviously submitted 5 (five) business days i onal charges and/or dela r PM and Add or Delet	n advance. lys.
	_	_	June 2022	•		
Sunday	Monday	Tuesday	Wednesday 1	Thursda 2	ay Friday 3	Saturday 4
others not listed. S Holiday: June 19th	Sessions may be schedu h – Father's Day	iled on these days.	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:
5 Add Delete Time: AM PM Length:	6 Add Delete Time: AM PM Length:	7 Add Delete Time: AM PM Length:	8 Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:
Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:
Add Delete Time:	Add Delete Time:	AM PM	Add Delete Time:	Add Delete Time:	Add Delete Time:	25 Add Delete Time:

AM PM	AM PM	AM PM	AM PM	AM PM	AM PM AM PM Length:
Length:	Length:	Length:	Length:	Length:	
26 Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	28 Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	Add Delete Time: AM PM Length:	If any requested session conflicts with another organization's scheduled session, yours will not be approved. The Office has the right to deny modification if organization is in arrears.